## FY 2004 CHALENG (Community Homelessness Assessment, Local Education and Networking Groups) Participant Survey

2/19/04

For optimum accuracy, please p contact with the edges of the box an example:		e as 1 2 3 4 5 6 7 8 9 0				
DO NOT FOLD, P	нотосору ог	R Shade Circles Like This> ●				
FAX THIS FORM  Not Like This> ×						
Today's date:						
Your name/title:						
Agency name:						
Street address:						
City:	State	zip:				
Phone number:		Fax number:				
Email:						
1. Are you a homeless or form	nerly homeless veteran	n? (Check if applicable)				
O Homeless Veteran O Formerly	Homeless Veteran					
2. Title Category/Your Program	n Function (please che	eck one):				
O Executive/Top Level Manager (Ex		•				
Administrative/Mid-Level Manager     Clinician (social worker, case man		gram Supervisor) er, doctor, CSO, LVER, LVOP, VDOP)				
Elected Government Official or rep		1, doctor, 000, Every, Evor , vBor )				
O Board Member						
Other (financial officer, attorney, p	olice officer, office manager,	, admin staff, planning staff, etc.)				
		ng information for the Federal Faith-Based and you represent for CHALENG a faith-based				
○ No ○ Yes	O Not Sure	<ul> <li>Not representing an agency</li> </ul>				
OFFICE USE ONLY - DO NOT WRITE BELOW THIS LINE						
	Station	Affiliated VA				

the facility you're from (CHECK ONLY ONE)  O VA Medical Center O VA Regional Office O VA Out Patient Clinic O Vet Center O VISN O VA Central Office O VA National Cemetary Admin (NCA) O State Department of Veterans Affairs O Veteran Service Organization Non Profit Community Agency O Private For Profit Community Agency O Department of Defense (DOD) O Department of Labor (DOL) O Housing and Urban Development (HUD) Service Security Administration (SSA)	Personal and Agency Involvement in IALENG: (Answer both A and B)  first became involved in CHALENG deginning CHALENG meeting (10 years ago) year ago year ago year ago foday  My agency first became involved in CHALENG deginning CHALENG meeting (10 years ago) years ago years ago year ago year ago year ago
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**6. NEEDS** Please rate the following needs of homeless veterans in your community area: This is an overall rating. Thus you are assessing the unmet/met needs of homeless veterans in your area based on all local resources, not just VA resources.

Unmet	•			<ul><li>Met</li></ul>	Rating - Please shade one circle per line
1	2	3	4	5	
0	0	0	0	0	Assistance with personal hygiene
0	0	0	0	0	2. Food
0	0	0	0	0	3. Clothing
0	0	0	0	0	Immediate shelter (an emergency place to stay)
0	0	0	0	0	<ol><li>Transitional living facility or halfway house</li></ol>
0	0	0	0	0	6. Long-term, permanent housing
0	0	0	0	0	Detoxification from substances
0	0	0	0	0	Treatment for substance abuse
0	0	0	0	0	Services for emotional or psychiatric problems
0	0	0	0	0	10. Treatment for dual diagnosis
0	0	0	0	0	11. Family counseling
0	0	0	0	0	12. Medical services
0	0	0	0	0	13. Women's health care
0	0	0	0	0	14. Help with medication
0	0	0	0	0	15. Drop-in center or day program
0	0	0	0	0	16. AIDS/HIV testing/counseling
0	0	0	0	0	17. TB testing
0	0	0	0	0	18. TB treatment

PLEASE TURN OVER AND COMPLETE OTHER SIDE

Unm	et 🕶			Met	Rating - Please shade one circle per line		
1	2	3	4	5	g : ::::::g : ::::::::::::::::::::::::		
0	0	0	0	0	19. Hepatitis C testing		
Ō	Ō	Ō	Ō	Ō	20. Dental care		
0	0	0	0	0	21. Eye care		
0	0	0	0	0	22. Glasses		
0	Ö	Ö	O	0	23. VA disability/pension		
00000	0	0	0	0	24. Welfare payments		
0	0	0	0	0	25. SSI/SSD process		
0	0	0	0	0	26. Guardianship (financial)		
0000	0	0	0	0	27. Help managing money		
0	0	0	0	0	28. Job training		
0	0	0	0	0	29. Help with finding a job or getting employment		
0	0	0	0	0	30. Help getting needed documents or identification		
0	0	0	0	0	31. Help with transportation		
0	0	0	0	0	32. Education		
0	0	0	0	0	33. Child care		
0	0	0	0	0	34. Legal assistance		
0	0	0	0	0	35. Discharge upgrade		
Ō	Ö	Ō	Ó	Ō	36. Spiritual		
0	0	0	0	0	37. Other:		
7 \//bic	h throo	noodo fr	om 1 2	7 ara t	he most important for you to work on now?		
r. vvriic	ii uiree	needs ii	0111 1-3	aret	he most important for you to work on now?		

## 8. COMMUNITY FEEDBACK, PART I (ALL PARTICIPANTS COMPLETE)

General Assessment Questions Please shade one circle per line	Not	Highly
VA Accessibility: In general, how accessible do you feel VA services are to homeless veterans in the community?	1 0 2 0 3	3 4 5
Community Accessibility: In general, how accessible do you feel community services are to homeless veterans?	1 ) 2 ) 3	3 4 5 5
VA Commitment: Rate the VA's level of commitment to cooperating with your agency to serve homeless veterans.	1 0 2 0 3	3 4 5
Community Commitment: Rate your agency's level of commitment to cooperating with the VA to serve homeless veterans.	1 0 2 0 3	3 4 5
VA Cooperation: Rate the VA's level of cooperation with your agency in coordinating services for homeless veterans.	1 0 2 0 3	3 4 5 5
Community Cooperation: Rate your agency's level of cooperation with the VA in coordinating services for homeless veterans.	1 0 2 0 3	3 4 5 5
VA Service Coordination: Rate the ability of the VA to coordinate clinical services for homeless veterans with your agency.	1 0 2 0 3	3 4 5
Community Service Coordination: Rate the ability of your agency to coordinate clinical services for homeless veterans with the VA.	1 0 2 0 3	3 4 5 5

## 9. COMMUNITY FEEDBACK, PART II - IMPORTANT: VA STAFF SKIP

We are interested in the amount of collaboration between VA and other government and community agencies. Please let us know to what extent your agency and the VA have set up or implemented each of the following strategies:

- 1 = None, no steps taken to initiate implementation of the strategy.
- 2 = Low, in planning and/or initial minor steps taken.
- 3 = Moderate, significant steps taken but full implementation not achieved.
- 4 = High, strategy fully implemented.

Strategy - Please shade one circle per line	1	2	3	4
Interagency Coordinating Body - Representatives from the VA and your agency meet formally to exchange information, do needs assessment, plan formal agreements, and promote access to services.	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Co-location of Services - Services from the VA and your agency provided in one location.	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\overline{\bigcirc}$
Cross-Training - Staff training about the objectives, procedures and services of the VA and your agency.	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Interagency Agreements/ Memoranda of Understanding - Formal and informal agreements between the VA and your agency covering such areas as collaboration, referrals, sharing client information, or coordinating services.	$\bigcirc$	0	0	$\bigcirc$
Interagency Client Tracking Systems/ Management Information Systems - Shared computer tracking systems that link the VA and your agency to promote information sharing, referrals, and client access.	0	$\bigcirc$	$\bigcirc$	$\bigcirc$
Pooled/Joint Funding - Combining or layering funds from the VA and your agency to create new resources or services.	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Uniform Applications, Eligibility Criteria, and Intake Assessments – Standardized form that the client fills out only once to apply for services at the VA and your agency.	0	0	0	$\bigcirc$
Interagency Service Delivery Team/Provider Coalition - Service team comprised of staff from the VA and your agency to assist clients with multiple needs.	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Consolidation of Programs/ Agencies - Combining programs from the VA and your agency under one administrative structure to integrate service delivery.	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Flexible Funding – Flexible funding used to fill gaps or acquire additional resources to further systems integration; e.g. existence of a VA and/or community agency fund used for contingencies, emergencies, or to purchase services not usually available for clients.	$\bigcirc$	$\bigcirc$	0	0
Use of Special Waivers - Waiving requirements for funding, eligibility or service delivery to reduce barriers to service, eliminate duplication of services, or promote access to comprehensive services; e.g. VA providing services to clients typically ineligible for certain services (e.g. dental) or community agencies waiving entry requirements to allow clients access to services.	0	0	0	$\bigcirc$
System Integration Coordinator Position - A specific staff position focused on systems integration activities such as identifying agencies, staffing interagency meetings, and assisting with inite proposal development.	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$